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## FISCAL IMPACT REPORT

ORIGINAL DATE 1/19/08

SPONSOR Wirth, P LAST UPDATED \_\_\_\_\_ HB 48

SHORT TITLE First District Mental Health Court SB \_\_\_\_\_

ANALYST C. Sanchez

### APPROPRIATION (dollars in thousands)

Appropriation		Recurring or Non-Rec	Fund Affected
FY08	FY09		
	\$264.0	Recurring	General Fund

(Parenthesis ( ) Indicate Expenditure Decreases)

Duplicates,

SB 63 and one part of a larger Mental Health Court bill which will be sponsored by Senator Richard Martinez on behalf of the AOC but which has not yet been assigned a number.

HAFC (HB 2) adopted the executive budget recommendation for the First Judicial District mental health court, which includes \$87.9 thousand and an additional \$260 thousand for catch up clean up.

### SOURCES OF INFORMATION

LFC Files

#### Responses Received From

Administrative Office of the Courts (AOC)

Department of Corrections (DOC)

NM Health Policy Commission (HPC)

### SUMMARY

#### Synopsis of Bill

House Bill 48 seeks to appropriate \$264,000 from the general fund to the first judicial district for its existing adult mental health court program in order to fund staff, treatment services, and other operating costs.

### FISCAL IMPLICATIONS

The total amount of \$264,000.00 is recurring for personal services for a court clinician (1 FTE),

contractual services for treatment costs and operating costs for this program. This appropriation increases the budget of the first judicial district court.

There are several direct cost savings gained through operation of such a mental health court program, as well as several indirect costs that should be realized. The cost of incarcerating mentally ill offenders in jail will be reduced substantially due to their earlier release from jail and effective use of existing resources in the community. The costs of treatment while inmates are incarcerated will be avoided which, while not effecting the court budget, will be a cost avoidance for the counties, since Medicare/Medicaid benefits stop while people are incarcerated. The First's Mental Health Court program has drastically reduced the number of days mentally ill offenders spend in the hospital receiving psychiatric treatment, which in turn reduces the cost for the counties since the majority of participants are indigent. The Mental Health Court reduces the number of referrals to the State Psychiatric Hospital, which in turn results in cost savings for the Department of Health. The Mental Health Court program also reduces the amount of time law enforcement spend interacting with mentally ill offenders since only a small percentage have re-offended while participating in the Mental Health Court program.

### **SIGNIFICANT ISSUES**

This bill reflects a commitment by the First Judicial District to address the problem of untreated mental illness and its effect on the community.

This bill funds a mental health program that reduces the incidence of arrest and incarceration of repeat offenders with mental illness using the Court to mandate appropriate treatment rather than incarceration. This appropriation would allow the First Judicial District Court to continue to operate an adult mental health court program.

Mental health courts are part of the growing national trend towards therapeutic justice programs, or problem-solving courts, which are modeled on the nationally successful drug court programs. Like drug courts, mental health courts combine treatment and intensive supervision with the coercive power of the judiciary to ensure participants adhere to the treatment plan, medication compliance and other program requirements.

As with drug courts, mental health courts require close collaboration between the courts and key stakeholders within the community. Such programs also require treatment staff, in the form of psychologist or psychiatrists, family counselors and substance abuse counselors, as well as court staff trained for mental health diversion or supervised release services to administer and run the program.

### **PERFORMANCE IMPLICATIONS**

FY 08 is the fifth year the courts are participating in performance-based budgeting. This bill may have an impact on the measures of the district court in the following areas:

- Cases disposed as a percentage of cases filed
- Percent change in case filings by case types
- Clearance rate

The success of the program will be measured by tracking the success of treatment, medication compliance, retention rates and continued checking of court records and NMCJIS for recidivism.

## **ADMINISTRATIVE IMPLICATIONS**

House Bill 48 enables certain residents in the First Judicial District to receive mental health treatment services and to have their criminal charges resolved through mental health court without being sent to prison or placed on probation or parole; it could reduce the prison population or probation/parole caseloads. This mental health treatment could also reduce the likelihood that certain individuals in that district will commit new crimes (while mentally ill or suffering from untreated mental health issues). Thus, it could indirectly lead to fewer convictions, and thus perhaps a decrease (or at least no increase) in prison population and probation/parole caseloads.

## **CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP**

Duplicates SB 63; and this specific funding request will be included in a Mental Health Court bill carried on behalf of the AOC by Senator Richard Martinez. That bill has not yet been assigned a number, but will contain this funding request for the First Judicial District along with funding requests for two other Mental Health Court programs (at Bernalillo Metropolitan Court and in the Eleventh Judicial District).

HAFC (HB 2) adopted the executive budget recommendation for the First Judicial District mental health court, which includes \$87.9 thousand and an additional \$260 thousand for catch up clean up.

## **TECHNICAL ISSUES**

Reference to funding a “program manager and court clinician” on page one, line 23 should be edited to specify only the “court clinician” as the First Judicial District wants more of the appropriation available for treatment services.

The total requested amount of \$264,000 should be reduced to \$260,200 so that the amount matches the funding requested for this program in the Judiciary’s Unified Budget Proposal.

## **OTHER SUBSTANTIVE ISSUES**

According to the U.S. Bureau of Justice Statistics:

- Nearly a quarter of both State prisoners and jail inmates who had a mental health problem, compared to a fifth of those without, had served 3 or more prior incarcerations.
- Female inmates had higher rates of mental health problems than male inmates (State prisons: 73% of females and 55% of males; Federal prisons: 61% of females and 44% of males; local jails: 75% of females and 63% of males).
- Over 1 in 3 State prisoners, 1 in 4 Federal prisoners, and 1 in 6 jail inmates who had a mental health problem had received treatment since admission.

According to the New Mexico Behavioral Health Collaborative, 370,000 New Mexicans suffer from some form of mental illness including depression; and 71,000 adults have a serious mental illness, which includes individuals with schizophrenia, manic depression, major depression, panic disorder, and obsessive-compulsive disorder

**WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL**

The Mental Health Court program at the First Judicial District developed out of its Adult Drug Court Program. The court realized that a number of those who were not doing well in the Adult Drug Court Program were suffering from a co-occurring disorder and established a separate program to focus more clearly on such participants' underlying mental health problems. That Mental Health Court program was staffed through volunteer efforts of existing court and other criminal agency personnel, along with a \$50,000 grant from the city, which was used mostly for treatment services. That grant was reduced to \$30,000 in FY08, and will expire at the end of the fiscal year; the city will be unable to renew it after that. If the funds requested by this bill are not appropriated for the Mental Health Court program, it will have to severely cut back its treatment services, dropping its participant level from 20 to 5, at most. Continued volunteer efforts of court and other agency staff will become increasingly strained and difficult to maintain, threatening complete closure of the program.

CS/nt